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**DATE:** December 14, 2006

**PTO IDENTIFIER:** Application Number 10/600,619-Conf. #6841  
Patent Number

**Inventor:** Jong-Pyng CHEN et al.

**MESSAGE TO:** US Patent and Trademark Office

**FAX NUMBER:** (571) 273-8300

**FROM:** BIRCH, STEWART, KOLASCH & BIRCH, LLP

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**Attorney Dkt. #:** 0941-0761P

**PAGES (Including Cover Sheet):** 13

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Certificate of Transmission (1 page)  
Fee Transmittal (1 page)  
Request for Continued Examination Transmittal (1 page)  
Amendment After Final Action Under 37 C.F.R. 1.116 (9 pages)  
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PTO/SB/97 (09-04)

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Application No. (if known): 10/600,618

Attorney Docket No.: 0941-0761P

## Certificate of Transmission under 37 CFR 1.8

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<b>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2003 (H.R. 4818).</b>	
<b>FEE TRANSMITTAL For FY 2006</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) <b>790.00</b>	
<b>Complete if Known</b>	
Application Number    10/600,819-Conf. #8841	
Filing Date    June 23, 2003	
First Named Inventor    Jong-Pyng CHEN	
Examiner Name    J. Crepeau	
Art Unit    1745	
Attorney Docket No.    0941-0761P	

**METHOD OF PAYMENT** (check all that apply)

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<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
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## **FEES CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## **2. EXCESS CLAIM FEES**

**Fee Description**

**Each claim over 20 (including Reissues)**

Each independent claim over 3 (including Reissues)

#### **Multiple dependent claims**

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
21	$21 - 21 =$	x	=	Fee (\$)
HP = highest number of total claims paid for, if greater than 20.				Fee Paid (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
3	$3 - 3 =$	x	=	
HP = highest number of independent claims paid for, if greater than 3.				

### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets**      **Extra Sheets**      **Number of each additional 50 or fraction thereof**      **Fee (\$)**      **Fee Paid (\$)**  
\_\_\_\_\_ + 100 = \_\_\_\_\_ /50      (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

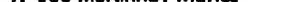
**4. OTHER FEE(S)**

**Non-English Specification, \$130 fee (no small entity discount!)**

Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37

390 00

SUBMITTED BY

Submitted by  Signature **Joe McKinney Muncy** Registration No. (Attorney/Agent) 32,334 Telephone (703) 205-8026  
Name (Print/Type) **Joe McKinney Muncy** Date December 14, 2006